01/25/2010 12:35

Image# 10930102867

FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

_		For C	Other Than An	Authorize	d Committ	tee		Office Use 0	Only
1.	NAME OF COMMITTEE (in full)		FEC MAILING LAE YPE OR PRINT		ample:If typing er the lines	g, type			
L	CareFirst BlueCross BlueSh	ield Ass	sociates' Federal Pa	4C				 	
		1 1	1 1 1 1 1 1			1 1 1 1			
AD	DRESS (number and street)	104	455 Mill Run Circle						
	Check if different								
L	than previously reported. (ACC)	Ow	vings Mill				MD	2111	17
2.	FEC IDENTIFICATION NUM	MBER	—	CITY 🛕		5	STATE	ZIF	PCODE A
	C00286922			3. IS THIS REPORT		NEW (N) OR		AMENDED A)	
4.	TYPE OF REPORT (Choose One)	(b	Nonthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Au	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:			Mar 20 (M3)	Jun 20 (M6)	Se	p 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15			Apr 20 (M4)	Jul 20 (M7)	Oc	et 20 (M10)	Jan 31 (YE)
	Quarterly Report(C	Q1)	(c) 12-Day		Primary (12F)	General	(12G)	Runoff (12R)
	July 15 Quarterly Report(0	Q2)	PRE-Election			<u> </u>	=		
	October 15 Quarterly Report(0	23)	Report for the	ne:	Convention ((120)	Special	(12G)	
	X January 31 Quarterly Report(Y		E	Election on					the tate of
	July 31 Mid-Year Report(Non-election Year Only) (MY)		(d) 30-Day Post -Elect Report for the		General (30	G)	Runoff	(30R)	Special (30S)
	Termination Repor	rt		Election on					the tate of
5.	Covering Period 0	7	01 200	9	through	12	3 1	2009	
Ice	ertify that I have examined this	Report	and to the best of r	ny knowledge	and belief it is	true, correct a	and complete	·.	
Тур	oe or Print Name of Treasurer	Je	eanne Kennedy						
Sig	nature of Treasurer Electro	onically I	Filed by Jeanne	Kennedy		D	ate 0 1	25	2010
NO	OTE : Submission of false, erro	neous,	or incomplete infor	mation may s	ubject the pers	son signing this	s Report to th	ne penalties of	2 U.S.C 437g.
	Office Use								ORM 3X

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 25

Write or Type Committee Name	
CareFirst BlueCross BlueShield	d Associates' Federal PAC

FEC Form 3X (Rev. 02/2003)

D D " D 07 0 1 2009 12 31 2009 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 27702.28 January 1 (b) Cash on Hand at 18397.20 Begining of Reporting Period 11004.92 18567.84 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 29402.12 46270.12 6(a) and 6(c) for Column B) 18626.96 35494.96 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 10775.16 10775.16 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 25

Write or Type Committee Name

CareFirst BlueCross BlueShield Associates' Federal PAC

Report Covering the Period:

From:

D D 0 1

м м 0 7 2009

та.

м м 1 2 ^D 31

^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	5544.00	6728.00
	(ii) Unitemized	3833.96	10212.88
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	9377.96	16940.88
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9377.96	16940.88
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. A	Il Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(0	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Colitical Committees	1000.00	1000.00
	Other Federal Receipts Dividends, Interest, etc.)	626.96	626.96
	ransfers from Non-Federal and Levin Funds		
(a	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(k	b) Levin Funds (from Schedule H5)	0.00	0.00
(c	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	11004.92	18567.84
	otal Federal Receipts ubtract Line 18(c) from Line 19)	11004.92	18567.84

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 25

II	. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ating Expenditures: Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) (Other Federal Operating	0.00	10.00
	Expenditures	0.00	10.00
	Fotal Operating Expenditures add 21(a)(i), (a)(ii) and (b))	0.00	10.00
	fers to Affiliated/Other Party	0.00	10.00
Comr	nittees	5000.00	5000.00
Contr Feder	ibutions to ral Candidates/Committeesbther Political Committees	0000.00	00000 00
		9000.00	22600.00
	endent Expenditure Schedule E)	0.00	0.00
Coord	linated Expenditures Made by Party		
(use S	nittees (2 U.S.C. 441a(d)) Schedule F)	0.00	0.00
6. Loan	Repayments Made	0.00	0.00
7	Mada	0.00	0.00
	s Made nds of Contributions To:	0.00	0.00
	ndividuals/Persons Other Than Political Committees	0.00	8.00
'	Harri Oillica Committees		
` '	Political Party Committees	0.00	0.00
` '	Other Political Committees such as PACs)	0.00	0.00
,	Total Contribution Refunds		
()	add Lines 28(a), (b), and (c))	0.00	8.00
9. Other	Disbursements	4626.96	7876.96
o. O.1101			
	ral Election Activity (2 U.S.C 431(20))		
` '	chared Federal Election Activity		
,	rom Schedule H6) i) Federal Share	0.00	0.00
(,, , , , , , , , , , , , , , , , , , , ,		
(ii) "Levin" Share	0.00	0.00
` '	ederal Election Activity Paid Entirely Vith Federal Funds	0.00	0.00
(C)	Fotal Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
i1. Total	Disbursements (add Lines 21(c), 22,		
	24, 25, 26, 27, 28(d), 29 and 30(c))	18626.96	35494.96
_0, 2	, , , , , , , , , , , , , , , , , , , ,		
	l Federal Disbursements		
	tract Line 21(a)(ii) and Line 30(a)(ii)	4000000	25.40.4.22
from	Line 31)	18626.96	35494.96

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 25

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	9377.96	16940.88
34.	Total Contribution Refunds (from Line 28(d))	0.00	8.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	9377.96	16932.88
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	10.00
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	10.00

FE6AN026

A.

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SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 25 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Ass	sociates' Federal PAC	
Full Name (Last, First, Middle Initial) CareFirst BlueCross CareFirst BlueCross Blue Mailing Address 10455 Mill Run Circle		Date of Receipt 0 7
City	State Zip Code	Transaction ID: 32108037
Owings Mills	MD 21117-4208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	626.96
Name of Employer CareFirst BlueCross BlueS- hield	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 626.96	Payroll deposit made in error - correction made September 8, 2009

SUBTOTAL of Receipts This Page (optional)	•	626.96
TOTAL This Period (last page this line number only)	•	626.96

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 / 25	
	EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 15 X 16 11	7
	ny information copied from such Reports and State for commercial purposes, other than using the nar				
$\overline{\ \ }$	NAME OF COMMITTEE (In Full)				
\rangle	CareFirst BlueCross BlueShield Associate	es' Federa	al PAC		
	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee			Date of Receipt	
	Mailing Address 430 South Street, SE			1 2 1 4 2 0 0 9	
	City	State	Zip Code	Transaction ID: 32689337	
	Washington	DC	20003	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer	Occupation	1		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number only)	<u> </u>	1000.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 17
í	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associated	ciates' Feder	al PAC	
∠ A .	Full Name (Last, First, Middle Initial) Gregory A Devou			Date of Receipt
	Mailing Address 3132 River Valley Cha	12 31 2009		
	City West Friendship	State MD	Zip Code 21794	Transaction ID: PR1262109718589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.00
	Name of Employer CareFirst of Maryland, Inc	Occupation EVP & C	n HIEF MARKETING OFFR	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.00	P/R Deduction (\$16.00 Wee-kly)
– В.	Full Name (Last, First, Middle Initial) Michael J Felber			Date of Receipt
	Mailing Address 14 Lochmoor Court	12 31 2009		
	City	State	Zip Code	Transaction ID: PR1262109818589
	Timonium	MD	21093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		182.00
	Name of Employer CareFirst of Maryland, Inc	Occupation SVP, SA		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 364.00	P/R Deduction (\$14.00 Wee-kly)
_ C.	Full Name (Last, First, Middle Initial) David D Wolf			Date of Receipt
	Mailing Address 2337-1 Boston St			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262110118589
	Baltimore FEC ID number of contributing federal political committee.	C	21224	Amount of Each Receipt this Period 260.00
	Name of Employer CareFirst of Maryland, Inc	Occupation EVP, ME	n DICAL SYSTEMS	
	Receipt For: Primary General Other (specify) ▼	, '	Year-to-Date ▼ 520.00	P/R Deduction (\$20.00 Wee-kly)
Γ	SUBTOTAL of Receipts This Page (optional) .	1		650.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 17
(Any information copied from such Reports and or for commercial purposes, other than using the	Statements may represent the statements of the statement of the statements of the statements of the statement of the statem	not be sold or used by any perso ess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Asso	ciates' Federal	PAC	
۷.	Full Name (Last, First, Middle Initial) John A Picciotto			Date of Receipt
	Mailing Address 704 Sussex Road	12 31 2009		
	City Towson	State MD	Zip Code 21286	Transaction ID: PR1262110218589
	FEC ID number of contributing federal political committee.	C	21200	Amount of Each Receipt this Period 260.00
	Name of Employer CareFirst of Maryland, Inc	Occupation EVP & GE	NERAL COUNSEL	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 520.00	P/R Deduction (\$20.00 Wee-kly)
_ 3.	Full Name (Last, First, Middle Initial) Rita A Costello	<u> </u>		Date of Receipt
	Mailing Address 1911 Corbridge Lane			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262117318589
	Monkton FEC ID number of contributing	MD	21111	Amount of Each Receipt this Period
	federal political committee.	C		156.00
	Name of Employer CareFirst of Maryland, Inc	Occupation SVP, STR	ATEGIC MARKETING	
	Receipt For: Primary General Other (specify) ♥	Aggregate \	/ear-to-Date ▼ 312.00	P/R Deduction (\$12.00 Wee-kly)
_ ;.	Full Name (Last, First, Middle Initial) Aliza Rothenberg			Date of Receipt
	Mailing Address 3413 Deep Willow Av	renue		1 2 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: PR1262119118589
	Baltimore	MD	21208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer CareFirst of Maryland, Inc	Occupation AVP, MAR	RKET PLNG & ANALYSIS	
	Receipt For: Primary General Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 260.00	P/R Deduction (\$0.00)
	SUBTOTAL of Receipts This Page (optional).			546.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
CareFirst BlueCross BlueShield Assoc	ciates' Federa	al PAC	
Full Name (Last, First, Middle Initial) Wanda K Oneferu-bey			Date of Receipt
Mailing Address 1319 Robin Road			12 31 4 2009
City Pikesville	State MD	Zip Code 21208	Transaction ID: PR1262121118589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	21200	260.00
Name of Employer CareFirst of Maryland, Inc	Occupation AVP, IND	n DIV SALES, TRNG, DVLPM	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 520.00	P/R Deduction (\$16.00 Wee-kly)
Full Name (Last, First, Middle Initial) Jeanne A Kennedy	1		Date of Receipt
Mailing Address 4915 Bramhope Lane			12 31 2009
City	State	Zip Code	Transaction ID: PR1262149018589
Ellicott City FEC ID number of contributing federal political committee.	MD C	21043	Amount of Each Receipt this Period 104.00
Name of Employer CareFirst of Maryland, Inc	Occupation VP, TREA		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 208.00	P/R Deduction (\$8.00 Week-ly)
Full Name (Last, First, Middle Initial) R L Wroth			Date of Receipt
Mailing Address Box 490			12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City St Michaels	State MD	Zip Code 21663	Transaction ID: PR1262153518589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		104.00
Name of Employer CareFirst of Maryland, Inc	Occupation DIRECTO	DR, MEDICAL II	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.00	P/R Deduction (\$0.00)
SUBTOTAL of Receipts This Page (optional)			468.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 25 (check only one) X 11a
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	CareFirst BlueCross BlueShield Associated	ciates' Feder	al PAC	
۱.	Full Name (Last, First, Middle Initial) Steven J Sanders			Date of Receipt
	Mailing Address 8495 Kings Meade Wa	ay State	Zip Code	12 31 2009 7 PD1262155619590
	City Columbia	MD	21046	Transaction ID: PR1262155618589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer CareFirst of Maryland, Inc	Occupatio MEMBEI	n R, SR TECHNICAL STAFF	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 208.00	P/R Deduction (\$8.00 Week-ly)
_ 3.	Full Name (Last, First, Middle Initial) William V Stack			Date of Receipt
	Mailing Address 9 Farm Ridge Court			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262156118589
	Baldwin	MD	21013	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		130.00
	Name of Employer CareFirst of Maryland, Inc	Occupation VP, COF	n RPORATE CONTROLLER	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Wee-kly)
. –	Full Name (Last, First, Middle Initial) Sandra A Dilworth			Date of Receipt
	Mailing Address 3 Tottenham Court			12 / 31 / 2009
	City Baltimore	State MD	Zip Code 21234	Transaction ID: PR1262162718589
	FEC ID number of contributing federal political committee.	C	21234	Amount of Each Receipt this Period 130.00
	Name of Employer CareFirst of Maryland, Inc	Occupation DIRECT	n OR, NETWORK & DESKTO	─ P \$E
	Receipt For: Primary General Other (specify) ▼	, '	e Year-to-Date ▼ 260.00	P/R Deduction (\$4.00 Week-ly)
	SUBTOTAL of Receipts This Page (optional)	1	_	364.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 25 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pone name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Asso	ociates' Federal PAC	
Full Name (Last, First, Middle Initial) Michele K Wise		Date of Receipt
Mailing Address 3612 Granite Road		1 2 3 1 2 0 0 9
City	State Zip Code	Transaction ID: PR1262164618589
Woodstock	MD 21163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	104.00
Name of Employer CareFirst of Maryland, Inc	Occupation DIRECTOR, OPERATIONS I	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	208.00	P/R Deduction (\$0.00)
Full Name (Last, First, Middle Initial) William W Showman	1	Date of Receipt
Mailing Address 2122 Country Fair La	ne	12 31 2009
City	State Zip Code	Transaction ID: PR1262170818589
Sykesville	MD 21784	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	104.00
Name of Employer CareFirst of Maryland, Inc	Occupation DIRECTOR, ACCOUNTING OPER	RATION
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	208.00	P/R Deduction (\$0.00)
Full Name (Last, First, Middle Initial) Livio R Broccolino		Date of Receipt
Mailing Address 713 East Seminary A	ve	12 31 2009
City	State Zip Code	Transaction ID: PR1262208118589
Towson	MD 21286	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer CareFirst of Maryland, Inc	Occupation VP & DEPUTY GENERAL COUNS	SEL
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	260.00	P/R Deduction (\$8.00 Week-ly)
SURTOTAL of Receipts This Page (ontinnal)		338.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	r not be sold or used by any perso Iress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Asso	ociates' Federa	al PAC	
۷.	Full Name (Last, First, Middle Initial) Sharon J Vecchioni			Date of Receipt
	Mailing Address 13003 Jerome Jay Dr	rive		12 31 2009
	City Hunt Valley	State MD	Zip Code 21030	Transaction ID: PR1262209918589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		208.00
	Name of Employer CareFirst of Maryland, Inc	Occupation EVP, CHI	IEF OF STAFF	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 416.00	P/R Deduction (\$16.00 Wee-kly)
_ 3.	Full Name (Last, First, Middle Initial) Gregory M Chaney Mailing Address 16 Fox Creek Court	_ I		Date of Receipt
				12 31 2009
	City Owings Mills	State MD	Zip Code	Transaction ID: PR1262210218589
	FEC ID number of contributing federal political committee.	C	21117	Amount of Each Receipt this Period 260.00
	Name of Employer CareFirst of Maryland, Inc	Occupation EVP, CF0	n O & TREASURER	
	Receipt For: Primary General Other (specify) ♥	Aggregate	Year-to-Date ▼ 520.00	P/R Deduction (\$20.00 Wee-kly)
- ;.	Full Name (Last, First, Middle Initial) Michelle J Wright			Date of Receipt
	Mailing Address 511 Forest Lane			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262215518589
	Baltimore FEC ID number of contributing federal political committee.	C	21228	Amount of Each Receipt this Period 104.00
	Name of Employer CareFirst of Maryland, Inc	Occupation AVP, STA	AFF SERVICES	
	Receipt For: Primary General Other (specify) ▼	_ , ,	Year-to-Date ▼ 208.00	P/R Deduction (\$8.00 Week-ly)
	SUBTOTAL of Receipts This Page (optional).	ı		572.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 25 (check only one) X 11a 11b 11c 12 15 16 16
		tatements may name and add	not be sold or used by any persordress of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
\	OMMITTEE (In Full) BlueCross BlueShield Assoc	iates' Feder	al PAC	
Full Name (L Daniel J Winn	ast, First, Middle Initial)			Date of Receipt
Mailing Addre	ess 468 Five Farms Lane			12 31 2009
City <u>Timonium</u>		State MD	Zip Code 21093	Transaction ID: PR1262230718589 Amount of Each Receipt this Period
	ber of contributing al committee.	C		130.00
Name of Em CareFirst of	oloyer Maryland, Inc	Occupation AVP & M	n IEDICAL DIRECTOR III	
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$0.00)
Full Name (L William F Cas	ast, First, Middle Initial) sey			Date of Receipt
Mailing Addre	ess 1678 Campbell Road			12 31 2009
City		State	Zip Code	Transaction ID: PR1262241518589
Forest Hill		MD	21050	Amount of Each Receipt this Period
	ber of contributing cal committee.	C		104.00
Name of Emp CareFirst of	oloyer Maryland, Inc	Occupation	n EL, ASSISTANT GENERAL	
Receipt For: Primary Other (y General specify) ▼	Aggregate	Year-to-Date ▼ 208.00	P/R Deduction (\$0.00)
Full Name (L Wanda H Mo	ast, First, Middle Initial)			Date of Receipt
Mailing Addre	ess 5209 Janesdale Court			12 31 YYYYY
City		State	Zip Code	Transaction ID: PR1262249718589
	ber of contributing	C	20769	Amount of Each Receipt this Period 130.00
	al committee. Dloyer Maryland, Inc	Occupation		
Receipt For:		. '	OR, CORPORATE TAXATION Year-to-Date ▼ 260.00	P/R Deduction (\$0.00)
SUBTOTAL of	Receipts This Page (optional)	1		364.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 25 (check only one) X 11a
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Assoc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Jeffery W Valentine			Date of Receipt
	Mailing Address 224 Tyrone Circle	01-1-	7. 0.4	12 31 2009
	City Baltimore	State MD	Zip Code 21212	Transaction ID: PR1262275218589 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer CareFirst of Maryland, Inc		RP COMM & REP MGMT	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 208.00	P/R Deduction (\$4.00 Week-ly)
- s.	Full Name (Last, First, Middle Initial) Winston Wong			Date of Receipt
	Mailing Address 1998 Conan Doyle Wa	ay		12 31 2009
	City	State	Zip Code	Transaction ID: PR1262303718589
	Eldersburg	MD	21784	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		130.00
	Name of Employer CareFirst of Maryland, Inc		ARMACY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Wee-kly)
. –	Full Name (Last, First, Middle Initial) Michael B Edwards	1		Date of Receipt
	Mailing Address 14236 Bradshaw Drive	9		12 31 2009
	City	State	Zip Code	Transaction ID: PR1262403018589
	Silver Spring	MD	20905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		182.00
	Name of Employer Group Hosp & Med Srvcs, Inc		TWORKS MANAGEMENT	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 364.00	P/R Deduction (\$10.00 Wee-kly)
	SUBTOTAL of Receipts This Page (optional)			416.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 11
(Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements mage name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associ	ciates' Feder	al PAC	
۷.	Full Name (Last, First, Middle Initial) Susan E Homar			Date of Receipt
	Mailing Address 10821 Greene Dr.			12 31 2009
	City Mason Neck	State VA	Zip Code 22079	Transaction ID: PR1262428218589
	FEC ID number of contributing federal political committee.	C	22019	Amount of Each Receipt this Period 104.00
	Name of Employer Group Hosp & Med Srvcs, Inc	Occupatio VP, CAR	n REFIRST INS. AGENCY	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 208.00	P/R Deduction (\$0.00)
- 3.	Full Name (Last, First, Middle Initial) Jimmy W Riggs			Date of Receipt
	Mailing Address 1122 Bay Ridge Road			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262434118589
	Annapolis	MD	21403	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer Group Hosp & Med Srvcs, Inc	, '	R, ASSISTANT GENERAL	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 208.00	P/R Deduction (\$4.00 Week-ly)
_	Full Name (Last, First, Middle Initial) Robert M Thomas			Date of Receipt
	Mailing Address 1740 T St. Apt. #3			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262452018589
	Washington FEC ID number of contributing federal political committee.	C	20009	Amount of Each Receipt this Period 104.00
	Name of Employer Group Hosp & Med Srvcs, Inc	Occupatio DIRECT	on OR, MEDICAL II	
	Receipt For: Primary General Other (specify) ▼	, ·	e Year-to-Date ▼ 208.00	P/R Deduction (\$8.00 Week-ly)
	SUBTOTAL of Receipts This Page (optional)	1		312.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 25 (check only one) X 11a
\ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associated Associate	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) Gwendolyn D Skillern			Date of Receipt
	Mailing Address 9925 Middle Mill Dr. City	State	Zip Code	1 2 3 1 2 0 0 9 Transaction ID: PR1262714618589
	Owings Mills	MD	21117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		182.00
	Name of Employer CareFirst of Maryland, Inc	Occupation SVP, AU		
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 364.00	P/R Deduction (\$12.00 Wee-kly)
- 3.	Full Name (Last, First, Middle Initial) Stacey R Breidenstein	ı		Date of Receipt
	Mailing Address 1717 Boggs Rd			12 31 2009
	City	State	Zip Code	Transaction ID: PR1262762618589
	Forest Hill	MD	21050	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		104.00
	Name of Employer CareFirst of Maryland, Inc		OV CONTRACTING&INST I	REL
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 208.00	P/R Deduction (\$8.00 Week-ly)
_	Full Name (Last, First, Middle Initial) Andrea B Cherenzia			Date of Receipt
	Mailing Address 2075 Harvest Farm Ro	oad		1 2 3 1 2 0 0 9
	City	State	Zip Code	Transaction ID: PR1262836718589
	Eldersburg	MD	21784	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		104.00
	Name of Employer CareFirst of Maryland, Inc	Occupation DIR, SPE	n ECIAL INVESTIGATION	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 208.00	P/R Deduction (\$0.00)
	SUBTOTAL of Receipts This Page (optional)			390.00

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18/25 (check only one) X 11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield As	sociates' Feder	al PAC	
Full Name (Last, First, Middle Initial) Darlene L Lawrence			Date of Receipt
Mailing Address 8152 Bell Tower Cr	ossing		1 2 3 1 2 0 0 9
City Pasadena	State MD	Zip Code 21122	Transaction ID: PR1263207518589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		130.00
Name of Employer Group Hosp & Med Srvcs, Inc	Occupation AVP, PR	n OF REL&PERF BASED PG	M\$
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$0.00)
Full Name (Last, First, Middle Initial) Dennis A Cupido			Date of Receipt
Mailing Address 281 Hancock Avenu	ue		1 2 3 1 2 0 0 9
City Bridgewater	State NJ	Zip Code 08807-2656	Transaction ID: PR1263250518589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	156.00
Name of Employer CareFirst of Maryland, Inc	Occupation VP OPE	n RATIONS SUPPORT SERV	<u> </u>
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 312.00	P/R Deduction (\$10.00 Wee-kly)
Full Name (Last, First, Middle Initial) Maria H. Tildon			Date of Receipt
Mailing Address 5616 Cross Country	y Blvd		1 2 3 1 2 0 0 9
City	State	Zip Code	Transaction ID: PR1538197918589
Baltimore FEC ID number of contributing federal political committee.	C	21209	Amount of Each Receipt this Period 130.00
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	P/R Deduction (\$0.00)
SUBTOTAL of Receipts This Page (optional	al)		416.00

Any information copied from such Reports and Statements may not be sold or used by any pe or for commercial purposes, other than using the name and address of any political committee NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associates' Federal PAC Full Name (Last, First, Middle Initial) Andrew Sullivan Mailing Address 720 Bristol Rd City State Zip Code Wilmington DE 19803-2224 FEC ID number of contributing federal political committee. Name of Employer CareFirst of Maryland, In-CareFirst of Maryland, In-CareFirst, Middle Initial) Primary General Other (specify) ▼ 240.00 Full Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Occupation Vice President, Public Policy Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 300.00	Date of Receipt M M
Andrew Sullivan Mailing Address 720 Bristol Rd City State Zip Code Wilmington DE 19803-2224 FEC ID number of contributing federal political committee. Name of Employer CareFirst of Maryland, In- C. Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Receipt For: Occupation Vice President, Public Policy Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Transaction ID: PR1702348718589 Amount of Each Receipt this Period 208.00 P/R Deduction (\$0.00) Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code Wilmington DE 19803-2224 FEC ID number of contributing federal political committee. Name of Employer CareFirst of Maryland, In-C. Receipt For: Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)	1 2 3 1 2 0 0 9 Transaction ID: PR1702348718589 Amount of Each Receipt this Period 208.00 P/R Deduction (\$0.00) Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer CareFirst of Maryland, Inc. C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ C C Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)	Date of Receipt M M
C. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼	P/R Deduction (\$0.00) Date of Receipt M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Pull Name (Last, First, Middle Initial) David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Name of Employer Carefirst, Inc. Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Date of Receipt M M
David Grosso Mailing Address 3619 15th Street, NE City State Zip Code Washington DC 20017-3006 FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Receipt For: Other (specify) Primary General Other (specify) Full Name (Last, First, Middle Initial)	Transaction ID: PR1702348818589 Amount of Each Receipt this Period
Washington DC 20017-3006 FEC ID number of contributing federal political committee. C Name of Employer Carefirst, Inc. Occupation Vice President, Public Policy Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Transaction ID: PR1702348818589 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Carefirst, Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	Amount of Each Receipt this Period
Name of Employer Carefirst, Inc. Receipt For: Primary Other (specify) ▼ Occupation Vice President, Public Policy Aggregate Year-to-Date 300.00 Full Name (Last, First, Middle Initial)	200.00
Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	260.00
Primary General Other (specify) ▼ General 300.00 Full Name (Last, First, Middle Initial)	
· · · · · · · · · · · · · · · · · · ·	P/R Deduction (\$0.00)
····	Date of Receipt
Mailing Address 3023 O Street	12 31 2009
City State Zip Code	Transaction ID: PR1727227318589
Washington DC 20007-3108	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	240.00
Name of Employer CareFirst, Inc. Occupation President and CEO Receipt For: Aggregate Year-to-Date ▼	
Primary General Other (specify) Aggregate Year-to-Date 240.00	P/R Deduction (\$0.00)
SUBTOTAL of Receipts This Page (optional)	708.00
TOTAL This Period (last page this line number only)	7 00.00

TEMPER BIODURAGNESIS	Use separate schedule(s	1 -	NE NUMBER: PAGE 20 / 25 only one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	
Any Information copied from such Reports and State or for commercial purposes, other than using the result of NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associ	ame and address of any politica		
Full Name (Last, First, Middle Initial) Webb For Senate Mailing Address 426 C Street, NE			Transaction ID: 31210222 Date of Disbursement 08
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement	DO 20002	011	1000.00
Candidate Name Sen. James Webb		Category/ Type	
Office Sought: House Disb X Senate President State: VA District:	x Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Donna Edwards For Congress			Transaction ID: 31515524 Date of Disbursement
Mailing Address P.O. Box 441153			09 / 14 / 2009
City Fort Washington	State Zip Code MD 20749		Amount of Each Disbursement this Perio
Purpose of Disbursement Void - Donna Edwards For Congress Candidate Name		011 Category/	-500.00
Rep. Donna Edwards Office Sought: X House Senate President State: MD District: 04	vrsement For: 2010 X Primary General Other (specify)	Туре	Void - Donna Edwards For Congress
Full Name (Last, First, Middle Initial) Mikulski for Senate			Transaction ID: 31516941 Date of Disbursement
Mailing Address 10 G Street NE Suite	470		099 / 015 / 2009
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Perio
Purpose of Disbursement		011 Category/ Type	1000.00
Candidate Name Barbara Mikulski		I , yhe	_
Barbara Mikulski	orsement For: 2010 Primary X General Other (specify) ▼		

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)		eck only	NUMBE v one)	n.			PAGE	21 / 2	25
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	À	21b 27	22 28a		23 28b	24 28	Bc _	25 29	
	y Information copied from such Reports and Statem for commercial purposes, other than using the name										;
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associates		 	00 10 00	non cont				11 00111		
<u> </u>	Full Name (Last, First, Middle Initial)				Trans	sactio	n ID:	317	2545	7	
	Democratic Congressional Campaign Con	mittee			Date	of Dis	burse	ment			
	Mailing Address 430 South Street, SE				0 9	M /	^D 2	9 /	2	Ý 0 Ď 9	Y
		State Zip Code			Amou	ınt of	Each	Disbu	semer	nt this F	Perioc
	Washington Purpose of Disbursement	DC 20003							10	00.00	
	Candidate Name		011 atego								•
			Туре	-							
	Senate President	ment For: Primary General Other (specify)									
	State: District:										
	Full Name (Last, First, Middle Initial) AmeriPAC				Date	of Dis	burse				V
	Mailing Address 499 S. Capitol St., SW				1 ^M 0	M /	^D 0	^D /	¥ 2	ž o ŏ 9) Y
	City Washington	State Zip Code DC 20003			Amou	ınt of	Each	Disbu	rsemer	nt this F	Perio
	Purpose of Disbursement		011		L.				50	00.00	
	Candidate Name		atego Type	-							
	Office Sought: Senate President State: Disburse	ment For: Primary General Other (specify)									
	Full Name (Last, First, Middle Initial) AmeriPAC						n ID:	320 ment	9677	7	
	Mailing Address 499 S. Capitol St., SW				1 ^M 0	M /	^D 2	8 /	Y	Ý 0 Ď 9	Y
	City Washington	State Zip Code DC 20003			Amou	ınt of	Each	Disbu	rsemer	nt this F	Perio
	Purpose of Disbursement Void - AmeriPAC		011			-			-50	00.00	
	Candidate Name		atego Type								
	Senate President	ment For: Primary General Other (specify)			Void	- Am	eriP <i>F</i>	VC			
_	State: District:										
										00.00	

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District:

SCHEDULE B (FEC Form 3X)	Use sena	arate schedule(s)		OR LIN			₹:			PA	GE	22 / 2	25	
ITEMIZED DISBURSEMENTS		category of the	<u> </u>	check or	nly or				_	_	_		_	
		Summary Page	ΙL	21b	Ш	22	Х	23	L	24	L	25		26
				27	Ш	28a		28b	L	28c	L	29		30b
Any Information copied from such Reports and Staten													6	
or for commercial purposes, other than using the nam	e and addre	ss of any political	comm	ittee to s	olici	t contri	buti	ons fr	ron	n such c	omr	nittee		
NAME OF COMMITTEE (In Full)														
CareFirst BlueCross BlueShield Associate	s' Federal	PAC												
/														
Full Name (Last, First, Middle Initial)						Transa	acti	on ID):	32300	816	5		
Cummings for Congress						Date o								
							Л	/ D	1 7) / Y	Y	0 0 5	Υ	
Mailing Address 2901 Druid ParkDrive						1 1			1 /	'l L	. 2	009	,	
City	State	Zip Code				Amour	nt of	f Each	n D	isburse	men	t this F	Perio	od
Baltimore	MD	21215					-				O.E.	00.00		
Purpose of Disbursement							-				25	00.00	_	
				11										
Candidate Name Elijah Cummings				egory/										
· · · · · · · · · · · · · · · · · · ·			- 1	/pe										
1	ement For:	2010												
	Primary	General												
President	Other (spe	ecify) 🔻												
State: MD District: 07														
Full Name (Last, First, Middle Initial)					.	Transa	acti	on ID	:	32478	992	<u> </u>		
Forward Together PAC						Date o	f Di	sburs	en	nent				
						1 2 N	Л	/ D	1) / Y	Y	0 0 5	Y	
Mailing Address 201 North Union St.						1 2) 1	Ч L		008	,	
Suite 300	0	7: 0 !							_					
City Alexandria	State VA	Zip Code 22314				Amour	nt of	Each	ו ו	isburse	nen	t this i	eric	od
	VA	22314									40	00.00		
Purpose of Disbursement				4.4				-		-	+0	00.00	_	
Candidate Name				11										
Candidate Name				egory/										
Office Occupity Theorem			1)	/pe										
	ement For:	0												
Senate	Primary	General												
President	Other (spe	есіту) 🔻												

SUBTOTAL of Disbursements This Page (optional)	•	6500.00
TOTAL This Period (last page this line number only)	•	9000.00

State:

Image# 10930102889

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (ch	R LINE NUMBER: PAGE 23 / 25 eck only one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page	21b X 22 23 24 25 26 27 28a 28b 28c 29 30b
Any Information copied from such Reports and Statemer or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associates	Federal PAC	
Full Name (Last, First, Middle Initial) BluePAC Mailing Address 1310 G Street NW		Transaction ID: 32092704 Date of Disbursement Mom / Date / Y Y Y O O 9
Washington, Purpose of Disbursement	state Zip Code DC 20005	Amount of Each Disbursement this Period 5000.00
Candidate Name	Catego Type	
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)	
State: District:		

		5000.00
SUBTOTAL of Disbursements This Page (optional)		3000.00
TOTAL This Period (last page this line number only)	•	5000.00

	CHEDOLL D (I LC I OIIII 3X)	Use separate schedule(s)			LINE NUN k only one			L	FAGL	24/2	:0
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		27	b 2	2 Ba	23 28b		8c >	25 29	20
	y Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Associates	and address of any political									
	Full Name (Last, First, Middle Initial) CareFirst BlueCross CareFirst BlueCross E	BlueS			D		tion ID	-		3 2 0 0 9	Y
	Mailing Address 10455 Mill Run Circle	7.01									
	Owings Mills	State Zip Code MD 21117-4208			A	nount	of Each	n Disbu		nt this F	-
	Purpose of Disbursement Payroll deposit made in error 7/24/09 - correction n Candidate Name	nade 9/8/09	Ca	001 tegory Γγρе	7					326.96	•
	Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)		71	Pa eri ma	yroll or 7/2 ade 9	depos 24/09 /8/09	t mad corre	e in ection		
	Full Name (Last, First, Middle Initial) Mendelson for Council 2010				D	ate of	tion ID			4 2 0 ŏ 9	Υ
	Mailing Address c/o Brett Greene 1330 Geranium St, NW				L	1		1 7		2009	
	•	State Zip Code DC 20012			A [nount	of Each	n Disbu		nt this F	
	Phil Mendelson, COUNCIL @ LARGE DC Candidate Name Phil Mendelson		Ca	011 tegory Γype	/						
	* H	ment For: 2010 Primary General Other (specify)		N	Pr @	il Me LAR	ndelso GE D	n, CO	UNCI	L	
	Full Name (Last, First, Middle Initial) Fenty 2010					ate of	tion ID	ement	78990	_	V
	Mailing Address P.O. Box 12110					2	/ D	0 1	¥ 2	ž o ŏ 9	Y
		State Zip Code DC 20005			A	nount	of Each	n Disbu	rsemer	nt this F	eriod
	Purpose of Disbursement Adrian Fenty, MAYOR DC		(011	7 L				1(00.00	
	Candidate Name Mr Adrian Fenty			tegory Γype	/						
	Office Sought: House Senate President State: District:	ment For: 2010 Primary X General Other (specify)			Ac	rian I	Eenty,	MAYC	OR DO	0	
Г	Side Side Side Side Side Side Side Side									26.96	

S	CHEDULE B (FEC Form 3)	Use separate schedule(s)	FOR LINE	NUMBER: PAGE 25 / 25				
IT	EMIZED DISBURSEMENTS		(check only 21b 27	y one) 22 23 24 25 26 28a 28b 28c X 29 30b				
	Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee							
\rangle	NAME OF COMMITTEE (In Full) CareFirst BlueCross BlueShield Ass	sociates' Federal PAC						
	Full Name (Last, First, Middle Initial) DC Vote Mailing Address 2000 P Street, NV	N		Transaction ID: 32485492 Date of Disbursement M M / D D / Y Y Y O O 9				
	City Washington Purpose of Disbursement	vashington DC 20036						
	Contribution to a 501 (c)(3) educational ar		012 Category/					
			Type					
	Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify) ▼		Contribution to a 501 (c)- (3) educational and advocacy organization				

SUBTOTAL of Disbursements This Page (optional)	•	2500.00
TOTAL This Period (last page this line number only)		4626.96